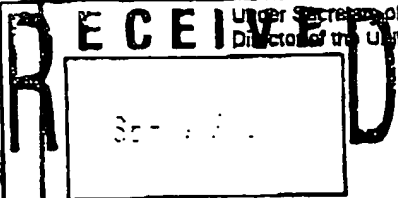




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U.S. PATENT AND TRADEMARK OFFICE  
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P.O. Box 1450

Alexandria, Virginia 22313-1450

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P. per No: 43

MILLEN, WHITE, ZELANO &amp; BRANIGAN

2804-0726

Badr, Gunter, et al

08/627,386

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B

Thursday, December 09, 2004

9:00 AM

MADISON BUILDING EAST WING

400 Dulany Street

Alexandria, Virginia 22313-1450

Millen White Zelano & Branigan  
Arlington Courthouse Plaza I  
2200 Clarendon Boulevard  
Suite 1400  
Arlington, VA 22201

Appellant:

Application No:

Hearing Room:

Hearing Docket:

Hearing Date:

Hearing Time:

Location:

*Inform Attendance: 10/11/04*

## NOTICE OF HEARING

## CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47.

The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up.

The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced.

## CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.

This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

Failure to file this form within this time period will be construed as a waiver of the request for oral hearing.

37 CFR § 1.136(a) does not apply.

By order of the Board of Patent Appeals and Interferences

## BPAI HEARINGS FAX No:

(703) 308-6199

USPTO Central Fax No.

(703) 872-9306

## BPAI Mailing Address:

BOARD OF PATENT APPEALS AND INTERFERENCES

UNITED PATENT AND TRADEMARK OFFICE

P.O. BOX 1450

ALEXANDRIA, VIRGINIA 22313-1450

Clerk of the Board (703) 308-9797

In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE:

☐ HEARING ATTENDANCE CONFIRMED☒ HEARING ATTENDANCE WAIVED

*[Signature]*

Signature of Attorney/Agent/Appellant

*10/12/04*      *50,908*

Date

Registration No.

Names of other visitors expected to accompany counsel

*done 10/12/04*  
*9-227*